## CITY OF LONG BEACH, DEPARTMENT OF PARKS, RECREATION AND MARINE FACILITY FEE WAIVER REQUEST FORM

Name of Organization	n:				
Mailing Address of O	rganization:				
Telephone Number:Email					
Facility/Park: Type of Function:					
Date of Function: Time:			_ No. In	No. In Attendance:	
Please check approp	riate boxes:				
	Social Hall Activity Room Reserved Picnic Area Open Space		Baseball/Soft Soccer Field Equipment Other (Please		)
Is this function a fun	draiser? 🗌 YES 🗌 NO				
Has your organizatio  Justification for Fee	n requested any other fo	ee waivers this	calendar year?	YES	□ NO
Long Beach to bill the g disqualify the group fro Commission in the ever	group for the full or partial a om being granted future fee	amount of the fee waivers. Applica Naiver request. A	es waived. In ad ant must attend applications mus	ldition, no Commiss	requirement may require the City of on-compliance of the conditions may ion meeting and testify to the ived by the posted due date in order
Name of Contact Person (print):Title:					
Signature of Contact Person:				P	hone:
Address of Contact F	Person:				
FOR DEPARTMENT US	E ONLY:				
The following fee charg	ge(s) is/are being request	ed for fee waiver	···		
Secur Other Permi	y Rental Fee: ity Deposit: Charges: t Fee: <b>Waived Charges</b>	Fees \$ \$ \$ \$ \$ \$ \$	# of Hrs  X  X  X  X  X	_ = _ = _ = _ =	Waived Charges  \$ \$ \$ \$ \$ \$
APPROVAL:					
Parks, Rec & Marine Director:					Date:
Bureau Manager Signature:					Date:
Registration/Reservations Office Review:					Date:
Approved Denied					Date:
FOR OFFICE USE ONL					
Contract/Permit No	Pı	rocessed by:			Date:

Distribution: Supt-Admin Svcs, Permit Coordinator, Facility Supervisor, Registration/Reservations Office